
Chapter 3: Michigan

The case study of Title V in Michigan, which focuses on the national evaluation communities of Holland/West Ottawa and Novi, demonstrates the successes that can be achieved in implementing the Title V model. Strong state- and local-level support, community collaboration, and fidelity to the Title V model were key factors in planning, implementing, and sustaining the Title V prevention activities within these two Michigan communities.

The first section of this case study presents and discusses state support for Title V from 1997 to 2002. The next sections present and discuss the Title V initiatives in Holland/West Ottawa County and the City of Novi (Novi) from 1997 to 2002. The final section presents concluding remarks on Title V in Michigan.

This presentation is based on four primary data sources in each community throughout its participation in the national evaluation: stakeholder interviews, in person and via telephone; a review of Michigan's Title V documentation, including the request for proposals and the community grant applications; a review of Holland/West Ottawa County's and Novi's Title V documentation, including the grant applications, quarterly progress reports, and prevention policy board meeting minutes; and a review of the federal Title V guidelines and documentation. In addition, the case study report includes the evaluation team's interpretation of the case study data that represents Caliber's experience of working with all 11 national evaluation communities during the multiyear implementation of the evaluation.

State Support for Title V

Michigan has been eligible to receive Title V funds in the range of \$450,000–\$1,380,000 from 1998 through 2002. The level of funding is based on the size of Michigan's juvenile population, a factor that determines the amount of Title V funds available to each state. The Family Independence Agency, the state agency in Michigan that implements Title V, chooses to support rounds of communities with sizable grant awards. On average, these awards range from \$12,000 to \$283,000. Since the beginning of Title V in 1994, Michigan has funded 34 Title V communities.

Michigan's Title V initiative is based on the Communities That Care curriculum for juvenile delinquency prevention efforts. Title V is generally viewed as the funding mechanism for implementing Communities That Care principles and strategies in communities across the state. Since the state and communities identify their work as Communities That Care rather than Title V, "CTC" or "Title V/CTC" will be used in this chapter when referring to the state and community initiatives.

Michigan's Granting Process

The Michigan Family Independence Agency, Child and Family Services Administration, Office of Juvenile Justice, is the state agency responsible for coordinating Title V grant activities in Michigan. According to its mission statement, the agency "helps to improve the quality of life in Michigan by protecting children and vulnerable adults, delivering juvenile justice services, and providing support to strengthen families and individuals striving for independence."

Title V funding rounds are determined by the state juvenile justice specialist and the Michigan State Advisory Group (SAG), in consultation with Family Independence Agency administrative staff. For each funding round, the state juvenile justice specialist sends to all eligible units of local government a request for proposals that invites interested parties to submit an application and outlines for them the federal and state-specific Title V requirements. Communities are also apprised of upcoming Title V training sessions and are encouraged to participate.

The SAG reviews the Title V subgrant applications, and the funding decisions are made. Grants are awarded on a 12-month fiscal cycle. Title V communities are guaranteed 4 years of funding (3 years under Title V and one under Title II) as long as they meet quarterly and annual evaluation and monitoring requirements. In an attempt to encourage communities to explore additional financial resources in the early phases of their Title V funding, Michigan has a stepdown funding policy, whereby communities receive funds each year at a rate that is reduced from that of the previous year. Under this policy, Title V subgrantees receive 100 percent of awarded Title V funds during years 1 and 2, 50 percent of the original Title V award during year 3, and Title II funds valued at 25 percent of the original Title V award in year 4.

At the request of the Michigan SAG, the Family Independence Agency also sets aside state and federal funds to support communities in completing the Title V planning phase. All communities that meet state-determined pre-grant requirements are eligible to receive a planning grant. From 1998 through 2000, the agency offered communities planning grants ranging from \$5,000 to \$15,000.

Training and Technical Assistance

Because Michigan makes the federally sponsored Title V training available to all its potential applicants, interested parties are encouraged to participate in the Title V training series before submitting a grant application. In 1996–97, when Holland/West Ottawa and Novi received Title V training, OJJDP’s Title V training contractor was Developmental Research and Programs, Inc., the group responsible for developing the Communities That Care training curriculum, which was used nationwide to train potential Title V grantees until 2000, when OJJDP hired a new training and technical assistance provider and implemented a new training curriculum. The Title V trainings were based on the Communities That Care curriculum and consisted of three sessions: key leader orientation, risk and resource assessment, and promising approaches.

Michigan also funds a technical assistance contract to the Michigan Public Health Institute to standardize quarterly data collection for each of the Title V sites. This standardization helped provide a very clear record of Title V activities in the community, including some of the unintended outcomes.

Evaluation

In 1997 (the year the Title V national evaluation case study communities applied for Title V grants), the Title V request for proposals, which included modified instructions and forms from the *Title V Community Self-Evaluation Workbook*, required grantees to list project-specific goals, objectives, activities, outcomes, and outcome measures. It also required communities to submit risk factor and indicator data for several periods, so a baseline could be established for tracking these data throughout the Title V initiative.

Through the state's technical assistance contract, Title V communities received frequent and ongoing evaluation technical assistance and training, including quarterly regional meetings and annual conferences. This training resulted in increased availability and accuracy of community-level data.

Other State Factors

As mentioned above, Michigan allocated non-Title V funds for Title V community planning grants of up to \$15,000 and provided evaluation technical assistance and training to support communities in the planning and implementation of Title V. To assist its Title V communities, the state of Michigan also integrated the *Title V Community Self-Evaluation Workbook* into Title V grant applications and quarterly reporting formats. Finally, the state of Michigan allocated a portion of its Title II funds to provide 25-percent funding to its Title V grantees in their fourth year of implementation.

Interpretation

Michigan's Title V request for proposals was based on the *Title V Community Self-Evaluation Workbook* and provided clear expectations about how to mobilize, assess, plan, implement, monitor, evaluate, and institutionalize the Title V initiative. Beginning with the detailed Title V grant application, the state of Michigan helped communities document their Title V process, providing them with a historical record they could use to publicize the initiative and to report data to state and community stakeholders. The state's strong support of the Title V model (e.g., providing planning grants, offering all three Title V training components, funding a training and technical assistance provider, and providing financial support for a fourth year of implementation) helped communities understand and buy into the Title V model in all its phases.

In Michigan, the strong state structure supported the Title V communities in the community mobilization process through a number of factors. First, key leader orientation training was provided to all community groups interested in pursuing Title V funding. Also, the Title V request for proposals asked communities to describe clearly how collaboration and coordination among different community groups had been achieved in the past and how key leaders and prevention policy board members were brought together to conduct policy planning for youth issues.

The state of Michigan also provided its Title V communities with strong support throughout the process of assessment and planning. First, as mentioned previously, Michigan sponsored all three components of the Title V training to assist communities through this difficult and often time-consuming task. Second, the Title V request for proposals provided clear forms and instructions for presenting priority risk factor data and program plans. The state further supported the ongoing updating of this initial data collection by providing similar forms for communities to use in their quarterly and annual reporting.

To support program implementation efforts, in 1997 the state of Michigan offered the federally sponsored promising approaches training to potential Title V communities. There was no requirement that applicants for the Title V funds implement a promising or science-based program, however. In fact, the review criteria for the 1997 Title V grant application required only that the proposed service delivery programs and systems change projects have the ultimate goals of reducing delinquency and improving the overall quality of life in the community.

Michigan also provided its Title V communities with strong support throughout the process of monitoring and evaluation. First, the Title V request for proposals provided clear forms and instructions for presenting program goals, objectives, and outcomes. It also included some guidance to communities about how to conduct simple outcome evaluations of their programs and projects. Second, the state's annual reporting forms provided a method to track risk factor and juvenile problem behavior indicators, in both table and graph form. In addition, the state funded a training and technical assistance provider who helped communities complete their quarterly reports and report outcome data.

Finally, Michigan provided its Title V communities with strong support throughout the process of institutionalization. One contributing factor was that staff at the state and local levels had positive models because several initial Title V communities in Michigan had been very successful in implementing and institutionalizing their Title V initiatives. Another factor was the large Title V grants that the state was able to provide. Many communities were able to implement large, communitywide programs that attracted attention from the media and from key individual stakeholders and organizations (e.g., school districts and county agencies) that were willing to provide ongoing funding at the conclusion of the Title V funding.

Summary

Overall, Michigan's support of the Title V model was very strong. The state dedicated significant resources to support the Title V communities. This support is evident in the successful implementation experiences of the two communities that participated in the Title V national evaluation. Case studies of the Holland/West Ottawa County Title V initiative and the Novi Title V initiative are presented in the remainder of this chapter.

Holland/West Ottawa County

This case study documents the Title V process in Holland/West Ottawa County from the county's initial planning for the Title V initiative in 1996 through the program end in September 2002. As the following sections describe, the Title V initiative in Holland/West Ottawa County achieved success in each stage of the Title V model, particularly in terms of planning, implementing, and sustaining prevention activities. As originally planned, the Holland/West Ottawa prevention policy board was disbanded at the conclusion of the Title V funding.

This case study presentation begins with a brief community description and discussion of the role of Title V in Holland/West Ottawa County. It continues with presentations and discussions of the five stages of the Title V model as implemented in Holland/West Ottawa County: community mobilization and collaboration, initial assessment and planning, implementation of prevention strategies, monitoring and evaluation, and institutionalization. This section concludes with the evaluation team's interpretation of the data.

Brief Community Description

Ottawa County is located in the southwestern section of Michigan's lower peninsula, bordered on one side by Lake Michigan. Calendar year 2000 census data estimated the population of the county at 243,571 residents.

Ottawa County is more than 90 percent white. Overall area demographics do not reflect the large concentration of immigrant households in the target area, however, which are largely Hispanic (7.0 percent of Ottawa County's population), but also Southeast Asian

(2.1 percent). Median household income in the county was reported as \$52,347, almost \$10,000 higher than the median household income in Michigan.

Holland/West Ottawa County

Funding period: January 1998–June 2001

Amount of Title V funding: \$545,355

Unit of local government: Ottawa County

Implementing agency: Ottawa Area Intermediate School District

The planned target community of the Title V initiative is an area of approximately 1 square mile encompassing the central core of the City of Holland plus adjacent neighborhoods in Ottawa County, the same area targeted by the community's earlier Office of Justice Programs' Weed & Seed strategy. Several of the Title V prevention activities, however, were targeted countywide.

Title V in Holland/West Ottawa

In Holland/West Ottawa, the Title V initiative was a broad-based delinquency prevention initiative, with some direct services strategies focused on targeted community groups and some systems change projects focused countywide. Title V activities filled several service gaps in the community and played a major role in institutionalizing new prevention strategies in the community.

Ottawa County has a strong history of residents working together to address problems and issues of concern to the community. For the last 20 years, Holland/Ottawa County has implemented a number of collaborative activities to support youth and family development. These activities include:

- ❖ **The Challenge of Children:** a tri-county initiative focusing on parents and children growing together. Since 1980, area human services agencies coordinate an annual free conference offering a keynote speaker and up to 75 workshops related to life skills and relationship building. The conference now attracts approximately 1,500 participants.
- ❖ **Community-Family Council:** a group of parents, siblings, professionals, and community advocates dedicated to supporting families of persons who have developmental disabilities.
- ❖ **Coordinated Community Planning for Prevention Services:** an activity established in 1987 to promote collaborative relationships among county human services providers, and interagency systems focused planning and implementation of prevention services.
- ❖ **Coordinating Network for Pregnancy and Parenting Support Services:** a network established in 1984 to help coordinate support services for teenage and other high-risk pregnancies and parents.

This network recently combined forces with the newly formed Teen Pregnancy Forum, a multiagency advocacy council working to address teenage pregnancy prevention and parenting.

The strong history and success of collaborative activities to support youth and families was an identifiable strength in Holland/West Ottawa County's Title V initiative.

In 1992, the city of Holland experienced its first gang-related homicide. As a result, the community focused with new urgency on the problem of juvenile delinquency, particularly on the alarming increase in area youth involved in gang activity. The community response to three gang stabbings in only a few months was immediate, intense, and across the board. Following a public outcry, the city of Holland convened a Youth and Family Task Force representing a cross-section of the community, which met for the next year to develop a comprehensive strategy.

In October 1994, the Macatawa Area, encompassing a targeted square-mile Holland City neighborhood and an area of comparable size in Holland Township, was selected as a Weed & Seed demonstration site. Operation Weed & Seed is a multiagency strategy that "weeds out" violent crime, gang activity, drug use, and drug trafficking in targeted neighborhoods and then "seeds" the target area by restoring these neighborhoods through social and economic revitalization.

One result of the participation in Weed & Seed was the opportunity to receive training in the Communities That Care curriculum, developed by Developmental Research and Programs, Inc. The training began in November 1995, when the concept was presented at a meeting of more than 40 key community leaders. Meeting attendees quickly recognized this approach to prevention planning (e.g., data-driven, risk-focused), with its emphasis on long-term prevention, as the next logical step after Weed & Seed's crime-reduction programs, which aimed to eliminate gang activity by addressing the underlying issues.

Several members of the prevention policy board noted that although the Weed & Seed initiative was viewed in the community as having mixed results, one positive outgrowth from that initiative was the opportunity to receive training. It was the training curriculum and its approach to prevention planning that allowed organizations within the community such as the public schools to share data and recognize the common issues affecting youth in the community. In addition, during the time that the training was being offered (over 16 months), the state of Michigan began planning for a new round of Title V funding that would be available to communities that met certain eligibility requirements. These would include completion of the federally sponsored Title V training curriculum (which, at the time, was the Communities That Care curriculum) and developing a 3-year comprehensive delinquency prevention plan.

The Weed & Seed program provided a structure and funding to address delinquency prevention issues in the community. Interview data suggest, however, that one result was "too much weeding and not enough seeding." No real emphasis was given to, or funding available for, prevention projects. The stakeholders involved in Weed & Seed who were more interested in prevention efforts believed that the Title V initiative offered a good structure that could be used to plan and implement the prevention strategies that were needed, and should build on the collaboration of the Weed & Seed initiative. According to Holland/West Ottawa County's initial Title V grant application,

The Weed & Seed initiative has been highly successful, with its communitywide collaborative nature credited with much of its success. Its multijurisdictional scope has also been key, preventing problems uprooted from one area from taking hold a few miles down the road. The Title V initiative builds on this successful collaboration.

Holland/West Ottawa County's Title V timeline is illustrated in figure 3.1.

Figure 3.1: Holland/West Ottawa County Timeline for the Title V Initiative

1994	Macatawa area selected as a Weed & Seed demonstration site
1995	Community receives Communities That Care (CTC) training
1997	Prevention Policy Board (PPB) applies for Title V grant
1998	Year 1 implementation of Title V activities in school, community, and family domains
1999	Year 2 implementation of Title V activities in school, community, individual, and family domains
2000	Year 3 implementation of Title V activities
2001	Year 4 implementation of Title V activities
2002	Title V grant ends; prevention activities continue in all domains

Community Mobilization and Collaboration

Title V's community mobilization and collaboration process includes introducing community prevention to key leaders, forming a prevention policy board, and participating in prevention training. This section describes the process of community mobilization and collaboration for the Title V initiative in Holland/West Ottawa County from 1995 through 2002. It also discusses factors that influenced Holland/West Ottawa's mobilization and collaboration efforts.

Introducing Community Prevention to Key Leaders

With the October 1994 award of a Weed & Seed demonstration grant to the Macatawa area, community leaders became engaged in a process of assessment and planning in the areas of juvenile delinquency and youth development. Their decision to pursue funding for prevention efforts through the Title V initiative did not occur, however, until the state Juvenile Justice Unit released the grant announcement in 1997. The Title V initiative seemed like a good opportunity for the community, since it had already begun the planning process.

Prevention Policy Board

In November 1997, at the conclusion of the Communities That Care training and on receipt of the Title V application from the state of Michigan, an executive committee was formed, a chairperson was elected, and work began on a vision and the Title V plan. The role of the Holland/West Ottawa Communities That Care prevention policy board was to be responsible for oversight and policy determination to ensure proper implementation of the prevention planning process, including the ongoing development and implementation of the programs and projects identified to address each of three priority risk factors (family conflict, favorable attitudes toward problem behaviors, and early initiation of problem behaviors). The board's executive committee consisted of a chair, a vice chair, and chairs of the four domain groups: family, school, individual/peer, and community. Each domain group's chair led a workgroup of interested volunteers.

The prevention policy board was representative of the Holland/West Ottawa County community. In accordance with Title V requirements (and as emphasized in the training), the Holland/West Ottawa community's board had fewer than 21 members—10 members represented public agencies and 8 represented private, nonprofit organizations. The public agencies included the Ottawa County Juvenile Court, Holland Public Schools, West Ottawa Public Schools, Ottawa County Sheriff's Department, Holland Police Department, Ottawa County Health Department, Ottawa Area Intermediate School District, and the City of Holland. The private, nonprofit organizations included Child and Family Services of Western Michigan, Inc., the Boys & Girls Club of Greater Holland, Center for Women in Transition, Greater Holland United Way, and Evangelical Lutheran Church of America. The board did not include citizen representatives or youth members.

The Holland/West Ottawa prevention policy board oversaw the implementation of the Title V initiative. The board was made up of a chair, a vice chair, a past chair, the chairs of each domain workgroup, and one representative from both the Ottawa Area Intermediate School District and the Family Court. Annual elections for the board's officer positions were held each January. The board met monthly to review the progress of the prevention activities, identify additional resources that could support any additional needs of the committees, and work on the evaluation and institutionalization of the programs within the community. Beginning in the spring of 1998, the board was staffed by the project coordinator, who helped facilitate meetings by sending reminders and taking and distributing meeting minutes.

The board's roles and responsibilities were formalized in 1999, when it drafted a set of guiding policies and procedures. The board maintained its formal structure and membership throughout its 5 years of existence (1997–2002). Interview data indicate that the board always planned to institutionalize the Title V projects and programs within existing organizations in the community and, therefore, had no long-term plans to institutionalize itself once the Title V initiative was completed. According to one key stakeholder,

I think it was the four individual domains that really were the leadership. The Board really just kind of made sure that things were happening and as they said they were going to happen . . . I think that the impetus for the programming and for all of the things that got done . . . the detail stuff really went to the domains.

Community Prevention Training

As part of the earlier Weed & Seed initiative, three Communities That Care trainings—key leader orientation, risk and resource assessment and promising approaches—were conducted in Holland/West Ottawa over a 16-month period beginning in November 1995. According to the initial grant application,

With training spread out over several months, the newly designated prevention policy board was able to stay pure to the process, focusing its mission on ways to make a difference in the lives of children and their families. It was not until the State Juvenile Grant Unit published notification of the availability of the Title V grant in 1996 that funding was sought. By that time, the [Communities That Care] initiative was well underway, and the [board] had broken into four domains (community, individual, family, and school) to refine approaches that would address chosen risk factors.

The members of the board who did not participate in the initial training felt its impact; they felt the training helped start a new dialogue in the community regarding youth issues and prevention planning.

Factors That Influenced Community Mobilization and Collaboration

Community mobilization on prevention issues in Holland/West Ottawa County was spurred by a tragic incident in the community that resulted in its selection as a Weed & Seed demonstration site. The Weed & Seed project had several positive impacts in the community, including the opportunity for community members to participate in training and the formation of the Communities That Care prevention policy board, which developed the Title V grant application in 1997.

Several factors contributed to the success of the community mobilization process in Holland/West Ottawa County:

- ❖ **Strong history of successful collaborative efforts.** For more than 20 years, the Holland/West Ottawa area had a number of successful collaborations. In fact, the Title V initiative grew out of a prior collaborative effort that implemented the Weed & Seed initiative.
- ❖ **Thorough training process.** Over a 16-month period, training was offered to the community at a pace that allowed key leaders to understand the basic tenets of risk-focused, comprehensive prevention planning and to apply it accurately.
- ❖ **Wide community participation.** The initial training was offered to a cross-section of approximately 50 to 70 community members who were interested in learning the process. The training exposed a significant number of community members to risk-focused, comprehensive prevention planning and prevention strategies.

Initial Assessment and Planning

Assessment and planning include conducting a community needs assessment and developing a 3-year comprehensive prevention plan. In Holland/West Ottawa County, the Title V assessment and planning process took place from 1996 through 1997.

Identifying Risk Factors, Resources, and Prevention Programs

In accordance with their training, the Holland/West Ottawa key leaders followed the risk and resource assessment process very closely. They collected primary data on all of the 19 risk factors identified in the Communities That Care training materials. The key leaders received guidance from training consultants, but they collected and analyzed their own community data for the risk and resource assessment process. Program documentation states, in part, that “[a Communities That Care consultant] indicated that she had never seen another project organize the data piece as well as this project had done.” Following the analysis of all of the data, the prevention policy board identified family conflict, favorable attitudes toward problem behaviors, and early initiation of problem behaviors as the three priority risk factors for the community.

In the beginning, the initiative focused on the community, school, and family domains. At some point in the planning process, the individual domain was added and combined with the family domain. In year 2 of the Title V initiative, the prevention policy board and the project coordinator made efforts to secure funding for some limited data collection and analysis activities in the Individual domain.

Using the information provided in the Promising Approaches training, the board selected research-based strategies for the family domain (marriage preparation) and the school domain (home-school liaisons). While the Title V risk and resource assessment process was being conducted, the Ottawa County Human Services Coordinating Council was planning the implementation of a social marketing campaign with a locally developed plan (Attitudes Matter) to change community attitudes toward underage drinking. As a result, the Title V subcommittee handling the community domain merged with a subcommittee of the Ottawa County Human Services Coordinating Council to implement Attitudes Matter as part of the Title V initiative.

Developing a Comprehensive Prevention Plan

According to the initial grant application, “It was not until the Juvenile Justice Grant Unit published notification of the availability of Title V moneys that funding was sought. By that June, the initiative was well underway, and the [board] had broken into four different domains—community, individual, family, and school—to refine approaches that would address chosen risk factors.” Between March and August 1997, the Title V comprehensive plan and budgets were created, and the initial grant application was submitted.

The Title V comprehensive prevention plan initially included three primary strategies:

- ❖ **Building Healthy Families:** a multifaceted project that seeks to lay the foundation for family stability by promoting healthy relationships free from domestic violence. The project included prevention strategies targeted to three windows of opportunity in the lives of individuals when domestic violence efforts are most effective: during periods of relationship development (premarital); during the teen years, when models for relationship behavior are learned; and during the prenatal period, when parents-to-be are receptive to information on how to avoid conditioning their future children to violence.

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- ❖ **Raising Healthy Children:** a comprehensive program that targets children in the early elementary years with strategies that foster academic success and commitment, teach positive social and behavioral skills, and improve family support and management skills.
 - ❖ **Collaborative Primary Prevention Pilot Project:** a communitywide pilot marketing effort aimed at delivering the strong and consistent message that parental attitudes toward alcohol consumption play a major role in influencing children's decision to drink.

The Title V plan also included a full-time project coordinator and a part-time administrative assistant to support project implementation and the activities of the Holland/West Ottawa prevention policy board.

The Title V comprehensive prevention plan had two primary strengths. First, the programs and strategies it contained were well developed and ready for implementation. Second, the organizations and key leaders who would participate in implementing Title V prevention strategies (e.g., schools, social services providers, and the religious community) had been involved in the planning process and had helped develop or identify programs they knew they could implement within their organizations.

Factors That Influenced Initial Assessment and Planning

The chairperson of the prevention policy board led the assessment and planning for the Title V initiative in Holland/West Ottawa County. With assistance from Communities That Care trainers, the chairperson directed a large group of interested stakeholders through the data collection and analysis process. The chairperson kept the process true to what had been learned in the risk and resource assessment component of the training. The result was the development of a 3-year plan for the Title V initiative that included clear goals, objectives, and programs in three domains. Two factors contributed to the community's success in assessment and planning:

- ❖ **Leadership.** The community leaders who would later lead the initiative were able to collect, analyze, and communicate the assessment findings.
- ❖ **Planning process.** The thorough planning process allowed members of the community to identify the risk factors for youth in the community that could be addressed with the Title V initiative.

One factor hindered the community's efforts in assessment and planning: short timelines. The amount of time the community had to develop a 3-year plan and grant application for the Title V funds was short. As a result, the development of plans for the individual/peer domain was overlooked, and that domain was not included in the delinquency prevention plan.

Implementation of Prevention Strategies

The implementation of Title V prevention efforts includes initiating prevention services and activities and identifying and leveraging other resources for prevention. The implementation phase in Holland/West Ottawa County had the following key components:

- ❖ Holland/West Ottawa County operated its Title V initiative for a total of 51 months, from July 1998 through September 2002.
- ❖ Holland/West Ottawa County received approximately \$500,000 in total funding (in the Title V communities' fourth year of funding, they received their funding from Michigan's Title II grant), with a 50-percent match in local in-kind and monetary contributions by community organizations represented on the Holland/West Ottawa prevention policy board, including the Ottawa Area Intermediate School District and the Ottawa County Service Providers Network.
- ❖ Ottawa County served as the unit of local government, and the Ottawa Area Intermediate School District served as the fiscal agent.

The Title V funds were used to support a full-time project coordinator and to implement comprehensive strategies that were developed in the four domains identified in the Communities That Care training materials. In some cases, multiple strategies were developed for a single domain.

In the beginning, the individual domain was considered a part of the family domain; the plan did not contain strategies to address specific risk factors in the individual domain. In the second year, the individual domain was split off from the family domain, and funding was secured for some limited data collection and analysis activities in the individual domain. Subsequently, two strategies were implemented to address risk factors in this domain.

Over the 4 years of Title V implementation, seven separate prevention strategies were implemented in collaboration with other community organizations. A summary of the prevention strategies implemented by the Holland/West Ottawa County Title V initiative from 1998 to 2002 is presented in table 3.1.

Table 3.1: Prevention Strategies Implemented by the Holland/West Ottawa Title V Initiative

Domain	Holland/West Ottawa Subcommittee	Prevention Strategy Implemented	Implementation Period (in Years)
School	Raising Healthy Children	Home School Liaisons	1–3
Community	Attitudes Matter	Attitudes Matter . . . Parents, Alcohol and Youth	1–4
Family	Building Healthy Marriages	Marriage Preparation	1–4
	Building Healthy Families	In Touch With Teens	2
	Building Healthy Families	A Better Chance at Parenting	3–4
Individual	Growing Up Healthy	Youth Leadership	2–4
		Girls on the Run and Girls on Track	3–4

Raising Healthy Children

Based on Developmental Research and Programs, Inc.'s Seattle Project, Raising Healthy Children is a comprehensive program that addresses the early initiation of problem behaviors risk factor. It targets children in the early elementary years with strategies that foster academic success and commitment, teach positive social and behavioral skills, and improve family support and management skills. This program was implemented at two elementary schools: Longfellow Elementary in the Holland Public

School District and Pine Creek Elementary in the West Ottawa Public School District. Resources were provided for staff in-service and parent workshops, but the majority of the resources were allocated to provide for a full-time home-school liaison in each school. The home-school liaison was responsible for developing programs to support the at-risk youth and families served by the school.

At Pine Creek Elementary School, some resources had been allocated for youth who needed to develop social skills, but none were allocated to develop stronger links to parents in the community. For this reason, the home-school liaison at Pine Creek Elementary School spent time making home visits, assisting parents who may have a language barrier (primarily Spanish) with school communications, and implementing student support activities. Some of the activities included:

- ❖ Teaching 6-week social skills training classes, using the curriculum *Getting Along and You Can Choose*.
- ❖ Providing multicultural training to new staff.
- ❖ Making home visits and telephone calls, and conducting school meetings with parents.
- ❖ Organizing a school picnic and special family nights.
- ❖ Supporting afterschool programming, including the Homework Club, Chess Club, Boy Scouts, Girl Scouts, Funny Olympics, and Nutrition Club.
- ❖ Providing resources to parents and the school, including staffing the parent resource room and recruiting additional volunteers and resources to help the school.

In contrast, Longfellow Elementary School already had a strong link to parents in the community but lacked the resources of a dedicated staff person to work with youth on social skills development. Therefore, the home-school liaison at Longfellow Elementary worked with individual youth and small groups of students on social skills, service projects, and conflict resolution activities. The other activities included:

- ❖ Teaching 8-week social skills training classes, which included completion of a community service project.
- ❖ Providing professional staff training on conflict management.
- ❖ Conducting outreach to at-risk families through the Families and Schools Together Program and Standstar (a parent enrichment program).
- ❖ Planning for a prekindergarten program.
- ❖ Facilitating additional outreach to families through telephone calls, school meetings, and home visits.

The Title V funding supported the two home-school liaison projects for 3 years. With the reduction of Title V funding in the fourth year of the initiative, funds were no longer available to support the home-school liaison positions; therefore, faculty, staff, and volunteers at the participating elementary schools took on the implementation of many of the prevention strategies developed during the course of this project.

Attitudes Matter

The Title V community domain subcommittee collaborated with the Ottawa County Service Providers Network and the Strong Families Safe Children initiative to conduct a highly successful community awareness campaign, “Attitudes Matter ... Parents, Alcohol, and Youth,” which is intended to send the strong, consistent message that parental attitudes toward alcohol consumption play a major role in influencing children’s decision about drinking. As a systems change project, Attitudes Matter addressed two risk factors—favorable parental attitudes and involvement in problem behaviors—through several separate media campaigns between 1998 and 2002. The media campaigns included billboards, community forums, and an organized prevention message from county social services providers. In 1998, the 2-month Attitudes Matter campaign made more than 1 million outreach contacts in Ottawa County.

After the initial campaign, the Attitudes Matter committee received \$70,000 to hire a social marketing consultant to provide training and additional guidance to the campaign. The committee then secured \$18,500 to conduct a telephone survey of Ottawa County parents and a write-in survey of teachers and others who influence youth. As a result of the consultant’s recommendations, the committee decided to expand Attitudes Matter to a year-round campaign and pursue additional resources. The additional resources provided to the campaign by the Ottawa County Service Providers Network, the Strong Families Safe Children initiative, and the Ottawa County Health Department, in the second year of the campaign, made it possible to reduce required Title V funding from approximately 100 percent of the cost of the campaign to just 30 percent.

In subsequent years, the campaign grew to include representatives from several community coalitions in the county. For instance, the Attitudes Matter committee collaborated with the local faith community to stage a Christian rock concert, “Above the Influence,” in August 2002. During the concert, the performers periodically stopped the concert to give the Attitudes Matter message. The prevention campaign also took on a broader perspective by focusing on developing the social norm that “underage drinking is not acceptable in Ottawa County.”

Building Healthy Families/Building Healthy Marriages

The Building Healthy Families committee focuses on reducing domestic violence rates by implementing prevention strategies targeted at three key life stages: dating/forming relationships, premarital, and prenatal. The committee started by bringing community leaders together to set a standard for and support the implementation of a communitywide program of premarital counseling and the development of a community marriage statement. It evolved into a large, active committee consisting of local clergy, counselors, and social services professionals. In the spring of 1999, a county community marriage statement signing ceremony was held, at which 210 community leaders, including 107 people who would legally perform weddings in Ottawa County, publicly signed the statement that contained an

agreed-upon set of guidelines for premarital preparation and community support for marriage. The committee was unable to make the community marriage statement recommendation for premarital counseling mandatory because they felt uncomfortable requiring couples to participate in premarital counseling, even though four local judges signed the statement.

The Building Healthy Families committee held two training sessions in the Prepare/Enrich premarital counseling program for area clergy and counselors. In the first year, 40 people were trained to use the program with engaged couples. This training was supported in part by a \$2,500 grant for supplies from the Holland/Zeeland Community Foundation.

In year 2, the original Building Healthy Families committee established itself as an independent coalition, was renamed Building Healthy Marriages, and drew up separate bylaws and its own organizational structure. The Title V initiative continued to provide minimal fiscal and administrative support to the effort during the transition and served as a partner in the coalition, which was led by a home economist from the Michigan State University Extension and a local clergy member.

Following the institutionalization of the Building Healthy Marriages coalition, in March 2000 the Building Healthy Families committee was reconstituted to focus on the issue of healthy teen dating relationships. This strategy was designed to also address the risk factor family conflict by reducing the domestic violence indicator. The goal of the committee was to identify and train instructors in a curriculum that could be taught in local schools and youth services organizations. The re-formed committee included local educators and representatives from social services agencies, churches, and community organizations. After reviewing several curriculums, the committee agreed to focus on the Michigan Model for Comprehensive School Health Education, which teaches problem solving and conflict resolution and includes two violence prevention modules for middle and high school students. Students also are taught communications skills, personal safety, and sensitivity to others. Not only does the Michigan Model target appropriate skills for teens, but many schools and organizations in the Holland/West Ottawa area were familiar with the curriculum, and in many school districts it had already been approved for use.

In collaboration with the Ottawa Area Intermediate School District, the Building Healthy Families committee held a training on the components of the Michigan Model for Comprehensive School Health Education that address teen dating relationships. The training was offered to area educators and others who wanted to teach the curriculum. In Spring 2000, 18 people were trained. The committee discussed the next steps for the program, including hiring a consultant to design a stand-alone lesson on healthy teen dating and creating a videotaped lesson for new instructors. The committee did not pursue any of these strategies, however.

In the third year, Building Healthy Marriages continued its training and community awareness activities by, for example, translating its brochures and materials into Spanish and developing a Web site. Building Healthy Families completed its third planned strategy to address the risk factor family conflict by offering parenting classes. The class, “A Better Chance at Parenting,” provides parents who have a history of domestic abuse and violence with the education (via workshops) and resources they need to be better parents. The workshops are a collaborative project with Holland Community Hospital Foundation and the Child and Family Services of Western Michigan, Inc., and provide information about child development, healthy self-image, discipline, attachment theory, anger management, and parenting styles.

Growing Up Healthy

The peer/individual domain did not have any programming initiatives originally funded by Title V funds. Because the community found the Title V planning process, particularly the risk and resource assessment, a sound and effective way to identify needs, however, the Holland/West Ottawa prevention policy board took on the additional tasks of completing an inventory of community risks found in the peer/individual domain and looking at gaps that may exist in services. Its goals included identifying strategies to increase coordination among youth services providers and opportunities for meaningful involvement by youth.

In the second year of the Title V initiative, the Holland/West Ottawa project coordinator was awarded two grants to help support activities associated with the peer/individual domain. The first grant was used to hire a part-time staff person to develop a youth outreach plan. In developing the plan, staff met with local community groups that needed youth involvement. They also met with groups of local youth to assess their interests, concerns, and needs. In addition, a barrier survey was conducted to see what, if any, barriers might exist that prevent youth from experiencing meaningful involvement in the community. Staff also researched other successful models of youth involvement. Through youth input, the committee determined that youth would like to be involved in organization/agency decisions that affect them in their community, and it identified specific barriers that prevent youth involvement. An outreach plan was developed to help area organizations/agencies engage youth to serve as advocates for themselves and the community.

The second grant was used to fund an areawide positive youth development conference, “It’s Your Turn Behind the Wheel: A Youth-Driven Conference To Build Our Community.” Held in November 1999, this forum allowed approximately 150 youth to share ideas on how to improve the community.

On the basis of these initial findings in 2001, the peer/individual workgroup (renamed Growing Up Healthy) developed a strategic plan that had three areas of focus:

- ❖ Support youth leadership development with a fall conference.
- ❖ Increase awareness of volunteer opportunities for teens through a Web page sponsored by the local United Way.
- ❖ Support Girls on the Run, an afterschool program and running event.

This strategic plan guided the activities of the Growing Up Healthy committee in the final 2 years of the grant. A key component of the plan was the support of an annual community-sponsored youth conference, “Leadership as a Lifestyle.” The conference was designed to encourage youth to develop lifelong habits of giving and serving in the community by providing basic leadership training. Approximately 40 youth attend the annual conferences to gain skills, and they continue to be mentored by a member of the Growing Up Healthy committee in applying their leadership skills through community service.

The other large initiative of this committee and the entire Holland/West Ottawa prevention policy board was the sponsorship of Girls on the Run, an experiential learning program for third through sixth grade

girls that combines training for a 3.1-mile running event with self-esteem enhancement and uplifting workouts. Funded by a \$4,000 grant from Strong Families/Safe Children, 20 coaches were trained to lead 17 Girls on the Run programs at 11 local elementary schools and the Greater Holland Boys & Girls Club. A total of 391 third, fourth, and fifth grade girls were enrolled, and 364 girls ran in the event.

In the second year of the program, more than 1,500 girls participated in the event, and Girls on the Run continued to receive strong community support. Grant funding from Weed & Seed, Strong Families/Safe Children, Holland Community Hospital Foundation, Holland Community Education, and local civic organizations provided almost all of the program support. Girls on the Run also received volunteer support from the Ottawa Area Intermediate School District, Ottawa County Family Court probation officers, Ottawa County Health Department, local police officers, Holland Hospital, Hope College students, and local citizens. Gazelle Sports and New Balance Athletic Shoes, Inc., also supported the program by providing all participants with a new pair of New Balance running shoes at wholesale cost.

Identifying and Leveraging Other Resources for Prevention

In each of its domains, the Holland/West Ottawa prevention policy board was strategically able to identify and leverage community resources to support its prevention strategies. Throughout the implementation of the Title V prevention strategies, local community and religious organizations (e.g., Strong Families/Safe Children and Weed & Seed), charitable foundations (e.g., Holland/Zeeland Community Foundation and Holland Community Hospital Foundation), and local government organizations (e.g., the Ottawa County Health Department) contributed additional in-kind and financial resources for the implementation of Title V programs and projects. For example, more than \$32,000 was raised from 10 different organizations and from T-shirt sales and registration fees to fund the initial Girls on the Run program.

Factors That Influenced the Implementation of Prevention Strategies

Four committees that collaborated with other community organizations and leaders directed the implementation of the Title V initiative prevention strategies in Holland/West Ottawa. The project coordinator provided administrative support, while the prevention policy board provided additional guidance and support to the overall initiative. As noted above, seven separate prevention programs and strategies were implemented successfully during the 4-year Title V funding period (3 years with Title V funds and 1 year with Title II funds).

Several factors contributed to the community's success in implementation:

- ❖ **Strong planning process.** The success of the implementation was a direct result of the strong plan developed for the Title V initiative. Also, the Holland/West Ottawa prevention policy board and the project coordinator were able to implement the plan as designed.
- ❖ **Implementing appropriate prevention strategies.** The prevention strategies that were implemented were selected on the basis of a comprehensive assessment of the identified community risk factors. Since these strategies really met the community's needs, they helped to gain widespread buy-in.

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- ❖ **Allowing success to occur.** When a prevention strategy took hold in the community, the Holland/West Ottawa prevention policy board and the project coordinator were able to relinquish control of the project and allow it to expand and become bigger than originally planned.
 - ❖ **Building on early success.** Once some of the Title V prevention strategies (e.g., Attitudes Matter) had early success, the initiative and future projects had more credibility in the community.

Some factors hindered implementation. The ambitiousness of some plans is a salient example. As part of the Building Healthy Families project, three distinct strategies (marriage preparation, healthy teen dating, and parenting classes) were planned within a 4-year period. All were implemented, but the committee experienced some difficulties because of committee member burnout, the time needed to transition from project to project, and the need to recruit new stakeholders to support each of the different strategies.

Monitoring and Evaluation

The monitoring and evaluation stage of the Title V model theoretically should include several activities, including conducting program evaluations of each prevention strategy, evaluating the Title V initiative as a whole, and reassessing community indicators. This section describes the process of monitoring and evaluating the Title V initiative in Holland/West Ottawa County from 1998 through 2002 and presents factors that influenced the monitoring and evaluation process.

Monitoring and Evaluating Program Activities

Each domain in the Title V initiative had an evaluation component that was directed by the project coordinator. A strong program evaluation component, primarily in the form of survey instruments (e.g., the Communities That Care youth survey and the Search Institute survey), was a priority for both the prevention policy board and the project coordinator, who were committed to assessing the activities in each domain that were ultimately to affect the goals of the entire initiative. Outcome evaluation of many of the Holland/West Ottawa activities was difficult, however, because the systems change projects are aimed at long-term, communitywide knowledge, attitude, and behavioral changes that often are challenging to measure. To assist its evaluation efforts, the Holland/West Ottawa Title V initiative accessed expert resources such as hiring a social marketing consultant to provide advice on the expansion and evaluation of Attitudes Matter. Progress was made on the evaluation, and critical process and short-term outcomes have been reported. Linking the activities to long-term community-level behavior changes, however, has not been accomplished to date.

As part of the Title V national evaluation, Title V communities were offered evaluation technical assistance as an incentive to participate. In Holland/West Ottawa, Caliber Associates conducted several evaluation technical assistance sessions. This assistance included helping the project coordinator and key members of the prevention policy board to think about evaluation strategies and the development of a project logic model. In August 2002, Caliber helped Holland/West Ottawa develop materials for a daylong meeting entitled “Assessing and Celebrating Holland/West Ottawa Communities That Care.” The purpose of the meeting was to develop some lessons learned from the Title V initiative by board members and key leaders who had been involved in the process.

Raising Healthy Children

The Pine Creek Elementary home-school liaison conducted surveys of the social skills development program, the Homework Club, parent workshops, and staff training. Because the surveys were often conducted with small numbers of participants (e.g., 11 participants in the social skills development program) and for programs that had not been operating for the entire school year (e.g., a 6-week social skills program), it was difficult to use the survey results to measure program effectiveness.

Attitudes Matter

Several evaluation strategies were used for the Attitudes Matter campaign, including the Communities That Care neighborhood survey, a survey of the Ottawa County Service Providers Network, and a telephone survey of parents. The Holland/West Ottawa prevention policy board conducted its first neighborhood survey during August and September 1998. This survey provided baseline data for several programs and will be conducted during each year of the program to track changes. The initial neighborhood survey contained several questions about the Attitudes Matter social marketing campaign. The majority of parents surveyed agreed with statements supporting the goals of the initiative that encouraged parents to talk to their children about alcohol use. From the neighborhood survey, the majority of parents responded that they agree or strongly agree with the following statements:

- ❖ It is against my values to allow my children under the age of 21 to drink alcohol (72 percent).
- ❖ I clearly communicate my values about alcohol to my children (93 percent).
- ❖ My use/non-use of alcohol affects my children's use/non-use of alcohol (86 percent).

A survey of the Ottawa County Service Providers Network, the Title V initiative's partner in the Attitudes Matter campaign, showed that 94 percent of selected agencies participated in the campaign. The survey also found that 26 percent of the Service Providers Network agencies participated in social marketing training sponsored by the Creating Healthy Communities committee.

In October 1999, an extensive baseline telephone survey of 431 Ottawa County parents' attitudes toward alcohol was conducted. A followup survey was conducted in May 2000, after the conclusion of an Attitudes Matter media campaign. Responses to some of the questions on the followup survey included:

- ❖ Twenty percent of the respondents had heard of the Attitudes Matter campaign in May.
- ❖ Forty-six percent of the respondents indicated they had discussed alcohol use with their child since the campaign began.

Building Healthy Families

The 1998 neighborhood survey also provided some baseline data on marriage preparation issues. Eighty-five percent of respondents believed that mandating marriage preparation before couples were married in Ottawa County was somewhat or very desirable. When the survey was repeated in 1999, approximately 90 percent of the respondents believed that marriage preparation (but not mandatory marriage preparation) was somewhat or very desirable.

Building Healthy Families contracted with a Michigan State University doctoral student to provide additional data on the types of couples who have taken the marriage preparations classes and the Prepare/Enrich Inventory sponsored by Building Healthy Families.

Growing Up Healthy

The Growing Up Healthy committee conducted a series of teen focus groups from May through July 1999 to get data on youth opinions in the community. The results of these focus groups were summarized in two reports, *Assessment of Risk Factors of Youth in the Holland/Zeeland Area* and *Youth as Advocate Outreach Plan*. Eighty-nine students from the Holland/Zeeland area identified several barriers to teen involvement, including lack of time, interest, or transportation; language differences; lack of recognition or compensation; and need for childcare. They also suggested the following solutions:

- ❖ Recognizing positive youth impact in the media/community.
- ❖ Providing safe, age-appropriate activities and meeting places.
- ❖ Intergenerational events.
- ❖ Youth leadership training.

Ongoing Assessment

At the end of years 1 and 2, the Holland/West Ottawa project coordinator collected updated statistics on the indicators of the Title V initiative's three prioritized risk factors: family conflict, favorable attitudes toward problem behaviors, and early initiation of problem behaviors. Updated statistics on the indicators of juvenile problem behaviors were also collected. These indicators were not formally re-assessed in year 3 or 4.

For each risk factor and for several juvenile problem behaviors, the project coordinator was able to chart up to 4 years of indicator data (2 years of data reported in the initial grant application and 2 years of updated data) using data collection forms modeled on those developed for the Title V Community Self-Evaluation Workbook. The majority of the data remained fairly stable over the 4-year period, although there were some small fluctuations. No tests of statistical significance were reported on the annual variations.

Family Conflict

The indicators for the family conflict risk factor were the number of domestic violence cases and the number of service units provided by domestic violence prevention and treatment agencies (e.g., crisis calls, nights in a shelter). These indicators were updated on the basis of data from the local prosecutor's office and the local women's shelter. Analysis of the data on the family conflict indicators showed that there was a decrease in the reported number of domestic violence acts in the county from 1998 to 1999.

Favorable Attitudes Toward Problem Behaviors

The indicators for the favorable attitudes toward problem behaviors risk factor were perceived parental disapproval of substance abuse and adult drunk driving and drug arrests. These indicators were updated

on the basis of data from local surveys (e.g., Attitudes Matter, the Communities That Care neighborhood survey, and the Search Institute survey). Analysis of the data on the favorable attitudes toward problem behaviors indicators showed that the percentage of parents who indicated “It is against my values to allow my children under the age of 21 to drink alcohol” rose from 72 percent to 89 percent. The adult drunk driving and drug arrests indicator had some variation from year to year.

Early Initiation of Problem Behaviors

The indicators for the early initiation of problem behaviors risk factor were juvenile arrests, juvenile arrests for alcohol and other drug possession, and juvenile arrests for alcohol. These indicators were updated on the basis of data from the local family courts. Analysis of the data on the early initiation of problem behaviors indicators showed that juvenile alcohol-related arrests rose between 1998 and 2000.

Juvenile Problem Behaviors

Finally, several indicators for juvenile problem behaviors were updated based on data from the local health department and public schools. These indicators were teen pregnancies, clients in treatment centers, and number of school disciplinary actions regarding alcohol, tobacco, and other drugs. Analysis of the data on the juvenile problem behaviors indicators showed that the number of clients in treatment increased between 1997 and 1999, but the number of school disciplinary actions related to alcohol and other drugs decreased by 52 percent. The other indicators had some variation from year to year.

Factors That Influenced Monitoring and Evaluation

Evaluation and monitoring of the Title V initiative programs and projects were the responsibility of each domain committee, supported and guided by the project coordinator and the Holland/West Ottawa prevention policy board. A 1-day working session to develop lessons learned and anecdotal outcomes of the initiative was conducted, but an evaluation of the entire Title V initiative was neither planned nor conducted. Two factors hindered the community’s success in evaluation: a lack of evaluation skills and training, and the priority given to program implementation. In particular, Holland/West Ottawa planned and implemented an ambitious number of prevention programs and strategies that required an enormous amount of time on the part of volunteer committee members, paid program staff, and the project coordinator.

Institutionalization

The process of institutionalizing Title V includes sustaining the key components of the initiative, meeting goals and objectives, and obtaining continuation funding for successful programs and strategies. When the Title V funding ended in September 2002, organizations in the Holland/West Ottawa Community institutionalized the majority of the family, community, and peer/individual domain prevention strategies.

As noted, the length of the training and planning process in Holland/West Ottawa was beneficial because it allowed the prevention policy board to develop a clear plan for the Title V initiative that kept it on track during the 4 years of implementation. That plan had no intention to continue the board at the conclusion of the Title V funding. Except for a brief period in 1999–2000, when the board explored the

possibilities of continuing to work as a collaborative body, the plan was always to “sunset” the board once all of the Title V programs and projects were transitioned to other organizations in the community.

Beginning in year 2 of the Title V initiative, two projects, Attitudes Matter and the community marriage initiative, were in the process of being transitioned to organizations in the community that would continue sponsoring these Title V projects. By the end of the Title V funding, staff members or volunteers at other community organizations were continuing to implement portions of many of the other Title V prevention strategies. The process of institutionalizing each prevention strategy follows:

- ❖ **Raising Healthy Children.** Neither the Holland Public School District nor the West Ottawa Public Schools were able to financially support the home-school liaison positions at the conclusion of Title V. Despite attempts by members of the prevention policy board and the Raising Healthy Children committee to secure funds to retain the Home School Liaison positions, ultimately, continuation funds were not secured. At Longfellow Elementary School, the principal reported that the Title V initiative gave the school the opportunity to test social development programming. Now Longfellow’s classroom teachers are incorporating more social skills activities into their lessons. For example, one teacher now runs the parenting group that was started by the home-school liaison and another teacher now teaches the social skills lessons. Thus, individual teachers have picked up pieces of the Raising Healthy Children project.
- ❖ **Attitudes Matter.** In 2000, the Ottawa County government approved spending \$76,632 per year for 3 years to support the Attitudes Matter campaign. The funds were allocated from the Ottawa County Health Department general funds. An Ottawa County Health Department staff person was designated to work on the project half-time.
- ❖ **Building Healthy Families.** Building Healthy Families evolved into Building Healthy Marriages, with a strong group of stakeholders, support from area churches, separate bylaws, and its own organizational structure. By the end of year 2, 75 people had been trained in the Prepare/Enrich curriculum in Ottawa County through Building Healthy Families.
- ❖ **Growing Up Healthy.** Girls on the Run was institutionalized in year 4 by the Center for Women in Transition, a local organization with a mission to provide services and programs in domestic violence prevention, education, and intervention. The center, which was instrumental in much of the early planning and implementation of the Title V initiative, received a \$25,000 grant from the Nokemus Foundation to hire a Girls on the Run program coordinator. In addition, it was anticipated that the City of Holland would take over the Youth Leadership Conference as an annual event.

The Title V initiative had little impact on the level of program monitoring or evaluation conducted in Holland/West Ottawa. The prevention policy board tried to implement the evaluation strategies as planned in the initial Title V grant application, but in years 3 and 4 of the initiative, those tasks became more difficult to implement because several of the prevention strategies had been institutionalized within community organizations, the evaluation strategies were time consuming, and the initial evaluation strategies proved insufficient for documenting the actual program outcomes.

Neither the community mobilization stage nor the monitoring and evaluation stage of Title V was institutionalized in Holland/West Ottawa. The majority of the prevention strategies were institutionalized, however, and had strong community support. The Title V initiative was a source of seed money for Holland/West Ottawa County to use in implementing several locally developed prevention strategies based on an analysis of the priority risk factors. According to one key stakeholder, “. . . we just see when we’re done, it’s probably not just a few programs that have been institutionalized, but hopefully some new . . . networks, footsteps left.”

Several factors contributed to the community’s success in institutionalization:

- ❖ **Initial buy-in to the Title V initiative.** Many of the local organizations that were approached, or that volunteered to institutionalize the Title V prevention strategies, had been stakeholders in the Title V initiative since the planning or early implementation phase.
- ❖ **Prevention strategies that met community needs.** Local organizations were willing to institutionalize programs that were already well accepted and meeting the needs for community prevention.
- ❖ **A resource-rich community.** In Holland/West Ottawa, local organizations could appropriate funds and staff to continue the operation of the prevention strategies once they were turned over from Title V.

Interpretation

The Holland/West Ottawa Title V initiative is an excellent example of the successful implementation of the Title V model. The community stayed true to the Title V model from planning through institutionalization. Holland/West Ottawa is a very good example particularly of the spin-off successes that are possible when the Title V model is followed. In the end, several community organizations were engaged in continuing the delinquency prevention strategies initiated with Title V funding.

The fact that the community took 16 months to complete the Communities That Care training series is often mentioned as a key factor in its development of a 3-year plan that identifies risks and resources for youth in the community and proposes projects to address the priority risk factors. As some members of the prevention policy board have said, the process of reviewing the data made the priority risk factors that needed to be addressed very clear, and, as a result, reaching consensus became very easy.

Once the priority risk factors were identified and agreed on, the community selected strategies in three domain areas that would address the risk factors. The community focused on long-term prevention strategies to address the risk factors. It chose to promote marriage preparation programs in an attempt to decrease domestic violence rates in the county, to promote social skills development for elementary school youth in an attempt to decrease juvenile problem behaviors, and to promote parental responsibility for discussing alcohol and drug use in an attempt to decrease substance abuse rates.

Several key factors supported the success of the Holland/West Ottawa Title V initiative:

- ❖ **Strong funding.** The state of Michigan was able to provide Holland/West Ottawa with a substantial grant (approximately \$300,000 per year, including the matching resources) to provide partial funding to three projects and to fund a full-time coordinator.
- ❖ **The community's previous experience with the Weed & Seed initiative.** Weed & Seed brought together many of the same key leaders who would eventually plan the Title V initiative. It was through the Weed & Seed initiative that the community of Holland was offered the opportunity to participate in the Communities That Care training. Only toward the end of the planning process did the community become aware of the potential for state funding through the Title V initiative.
- ❖ **A strong, religiously based ethic of volunteerism and service.** The Title V initiative benefited from numerous volunteers' participation on the prevention policy board and its committees, and from other support of and participation in Title V-sponsored events in the community.
- ❖ **The Ottawa Area Intermediate School District.** The local school district was able to assist the initiative by providing not only in-kind office space and administrative support, but also communications and transportation. In addition, Title V's location at the school district's offices helped lend the initiative credibility.

Summary

The Holland/West Ottawa County Title V initiative was able to implement and smoothly transition through each phase of the Title V model, accomplishing many of its initial goals. Although the structure of the Title V initiative no longer exists in the community, several significant impacts of the initiative, in terms of collaboration and prevention programming, do remain.

Novi

This case study documents the Title V process in Novi from its initial planning for the Title V initiative in 1997 through the end of its Title V initiative in September 2002. The Title V initiative in Novi achieved success in each stage of the Title V model, particularly in terms of planning, implementing, and sustaining the prevention activities. As originally planned, the Novi Communities That Care Coalition also continued as an active volunteer group at the conclusion of the Title V funding.

This case study presentation begins with a brief community description and discussion of the role of Title V in Novi. It continues with presentations and discussions of the five stages of the Title V model as implemented in Novi: community mobilization and collaboration, initial assessment and planning, implementation of prevention strategies, monitoring and evaluation, and institutionalization. This section concludes with the evaluation team's interpretation of the data.

Brief Community Description

The 1998 population of Novi was approximately 45,000. According to the Novi Chamber of Commerce Web site, Novi's population, which grew by 32.3 percent from 1990 to 2000, is testament to the fact that "Novi is the fastest growing city in the state of Michigan." Families and individuals are moving to Novi in record numbers. The median household income in Novi is among the highest in metropolitan Detroit—above \$60,000 in some Novi zip code areas.

Novi

Funding period: January 1998–June 2001

Amount of Title V funding: \$661,971

Unit of local government: City of Novi

Implementing agencies: Novi Parks and Recreation, Novi Public Schools, and the Novi Police Department

Title V in Novi

Before the Title V initiative in Novi, some parents and local business leaders had been concerned about youth drug and alcohol use but had been unable to form a local coalition to raise community awareness of the issue. Nevertheless, several community organizations (including the Novi Police Department, Novi Community Schools, Providence Hospital Medical Center, Novi Youth Assistance, and Novi Parks and Recreation) began to increase their prevention activities to create a comprehensive network of prevention programs throughout the community.

Following a Parent-Teacher Organization meeting with the local superintendent of schools and the chief of police to address concerns about negative behaviors at the high school (e.g., increased reports of youth smoking), local stakeholders began to look into resources to address these issues. The chief of police identified the Title V initiative as a potential source of funding:

[The Parent-Teacher] organization expressed some concerns about all the youth problems . . . beyond just smoking. And I suggested that perchance we should attend an informational meeting about the Title V grant that was taking place in a couple weeks in Lansing . . . and I went over to that and sat in on it. We got a lot of information. We brought it back to the community, discussed it in rather general terms around in the community. It seemed to have some very favorable support in that regard.

With the advent of the Title V initiative in Novi, the community was able to establish a coalition, the Novi Communities That Care Coalition, whose mission was to decrease the number of youth deemed to be at risk and to provide opportunities for youth to be contributing and respected community leaders.

In Novi, the Title V initiative was focused on the implementation of two strategies to provide direct services to youth: an afterschool recreation program and the expansion of the D.A.R.E. program in the middle and high schools. The initiative also implemented a systems change project to increase the monitoring of local alcohol sales to Novi's underage youth through a sting initiative. As a result of Title V, the community formed a coalition, not only to monitor Title V activities, but also to initiate and support several other prevention activities. Novi's Title V timeline is illustrated in figure 3.2.

Figure 3.2: NOVI Timeline for the Title V Initiative

1996	Novi Communities That Care (CTC) Coalition formed
1997	Novi CTC applies for Title V grant
1998	Novi CTC receives Title V grant; Year 1 implementation of afterschool recreation, DARE, and sting programs
1999	Year 2 implementation of afterschool recreation, DARE, and sting programs
2000	Year 3 implementation of afterschool recreation, DARE, and sting programs; Title V grant ends
2001	Year 4 (funded under Title II) implementation of afterschool recreation, DARE, and sting
2002	Title V activities continued by the Novi Police Department and the Novi Department of Community Education

Note: In line with Title V regulations, Michigan provides Title V grantees with no more than 36 months of Title V funding. To support communities in their ongoing prevention efforts, however, Michigan encourages grantees to apply for Title II funds once they are no longer eligible to receive Title V funds.

Community Mobilization and Collaboration

The process of community mobilization and collaboration for the Title V initiative is expected to include the following tasks: introducing community prevention to key leaders, forming a prevention policy board, and participating in prevention training. This section describes the process of community mobilization for the Title V initiative in Novi from 1996 to 2002 and discusses factors that influenced mobilization and collaboration in Novi.

Introducing Community Prevention to Key Leaders

The identification of the Title V grant in 1996 as a potential funding source to address youth prevention issues in Novi was one of the first formal introductions of community prevention to key officials and leaders. When the police chief and the other stakeholders presented the information about the Title V initiative to the community, everybody wanted to be involved: homeowners, business leaders, schools, and city officials. According to the police chief, “[It was] very warmly received I thought. Everybody wanted us to proceed with it, so we did. As a result, of course, we put together the organization and started that process of making [an] application for the grant.”

Prevention Policy Board

The Novi Communities That Care Coalition was formed in 1996 during the process of writing the initial Title V grant application. The data collection and analysis process facilitated the community’s buy-in for the Title V prevention strategies. According to one key stakeholder, “The data really showed that there was a need for these strategies. After seeing the data, community members were willing to do more.”

Several key leaders saw the development of the coalition for the Title V initiative as an opportunity to form a permanent coalition to address prevention issues in the community.

The coalition's mission was to decrease the number of youth deemed to be at risk and to provide opportunities for them to be contributing and respected community leaders. When it was initially formed, the coalition included representation from local organizations such as the Providence Medical Center, Novi City Council, Novi Police, Probate Court, Novi Chamber of Commerce, Novi Youth Assistance, senior citizens, state representatives, parents, Novi Homeowners Association, Novi Parks and Recreation, Novi News, Novi public schools, youth, and the ministers' association. The coalition primarily served in advisory and advocacy roles for the Title V prevention strategies. The actual implementation of the strategies was led by local government agencies (i.e., the Novi Police Department and the Novi Parks and Recreation Department).

The coalition is an informal, volunteer board. Initially, committees were formed to evaluate and support each of the prevention strategies; however, the committee structure was not sustained. The coalition benefited from the participation of one of the key leaders of the initiative who initially coordinated it as a volunteer, but in subsequent years became the executive director of the coalition, receiving a salary from a small annual grant from the county government.

Following the initial planning year, which required frequent and intense meetings, the lack of clear responsibilities for the coalition made it difficult to recruit and retain members throughout the 4 years of implementation. According to the coalition's executive director, however, support for the coalition's mission and activities always existed in the community, even when there were not many active members.

In years 2 and 3, the coalition started new initiatives to support substance abuse prevention programs in the community through collaborations with:

- ❖ The Chamber of Commerce, to bring in a speaker on the topic of substance abuse in the workplace for community businesses owners.
- ❖ Novi High School, to discuss parenting issues.
- ❖ Novi Youth Assistance, to make a drunk driving video to be shown to all middle school and high school students and to religious and other youth groups in the community.
- ❖ Common Ground (a treatment and crisis center in Oakland County), to provide parenting classes to parents of children referred to Novi Youth Assistance or who attend alternative education classes.

The coalition also became a nonprofit organization to facilitate future fundraising following the conclusion of the Title V funding.

Community Prevention Training

In preparation for submitting the Title V grant application, key community stakeholders participated in the federally sponsored Title V training in 1996. These trainings, which were conducted using the

Communities That Care training curriculum, were seen as a key factor in community members' understanding of the processes and in the successes they achieved.

Factors That Influenced Community Mobilization and Collaboration

Community mobilization and collaboration on prevention issues in Novi was spurred by the availability of Title V funding to address issues that were of concern, but previously unaddressed, in the community. After the initial raising of awareness and action by community leaders, several factors contributed to the success of the community mobilization:

- ❖ **Leadership of key stakeholders.** The leaders of the Title V initiative in Novi were able to articulate the model and the benefits of implementing prevention strategies to other community members. They were also able to persuade the unit of local government to support the initiative with little orientation to the process or the plan.
- ❖ **Community readiness.** Although Novi had not attempted a community prevention initiative before, the strategy made sense to key leaders in the community, and they enthusiastically supported trying that approach.

Initial Assessment and Planning

The initial assessment and planning process for the Title V initiative is expected to include identifying risk factors, resources, and prevention programs and developing a 3-year comprehensive prevention plan. This section describes the process of initial assessment and planning for the Title V initiative in Novi from 1996 to 1997 and discusses the factors that influenced it.

Identifying Risk Factors, Resources, and Prevention Programs

To begin identifying risk factors, resources, and prevention programs, activities seen as the building blocks of the Title V grant application, stakeholders attended the federally sponsored Title V training. The stakeholders then returned to their community to lead the Novi Communities That Care Coalition in conducting a risk assessment. The coalition received a \$5,000 planning grant from the state of Michigan to support the planning process. Between May and July 1997, members of the coalition collected data in each of the four domains, as identified in the training materials. In addition, the Communities That Care youth survey was administered to 372 students (6th, 8th, 10th, and 12th graders) in the Novi public schools. The survey measured youth substance use and each risk and protective factor construct.

The survey findings revealed that Novi students were slightly higher than the six-state comparison group in alcohol use, especially in the 8th and 12th grades. Analysis of the survey data pointed to the need to implement prevention programming in school- or community-based programs that address social norms regarding the use of alcohol, tobacco, and other drugs and that stress school achievement and involvement. It also indicated that Novi should implement a program to improve the social skills of youth as a method for reducing substance use. Survey data were combined with the data collected by members of the coalition to prioritize the domain risk factors into the following:

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- ❖ Favorable attitudes toward problem behaviors.
 - ❖ Availability of drugs.
 - ❖ Friends who engage in problem behaviors.

Prevention strategies were designed to reduce these risk factors.

Developing a Comprehensive Prevention Plan

Key stakeholders in Novi attended the Title V training in 1996 in preparation for submitting a Title V grant application. Although the training helped them to understand the key components of the Title V model, after completing the training the coalition leaders did not realize that the Title V application (their comprehensive plan) had to be submitted by the unit of local government. This oversight resulted in delays and affected the relationships among some stakeholders.

The police department originally submitted the Title V grant application because it had the authority to submit grants to other state offices for funding. This application was returned to the community so it could be submitted under the auspices of the City of Novi. Although one Novi city councilperson had been involved in the planning for the Title V initiative, the entire city council was required to approve the grant application before it could be re-submitted. Key Title V stakeholders had to brief the entire city council quickly on the planned Title V initiative. The city council decided to support the Title V grant application, but some tension remained between the city council and the stakeholders who planned the Title V initiative because the city council was asked to accept fiduciary responsibility for a project it did not plan.

The initial Title V grant application, which served as the comprehensive prevention plan for Novi, included the assessment of risk and protective factors and the identification of the prevention strategies to be implemented with the Title V funds. The plan included three primary prevention strategies: adding the D.A.R.E. (Drug Awareness Resistance Education) program to the 8th and 10th grade health curriculum, creating community-based afterschool recreation programs, and operating a substance availability control program.

According to one key stakeholder:

Some of the data that we collected gave us an indication that the bulk of substance abuse was taking place in the home during the hours when kids were unattended. And so that was the basis in fact for starting the afterschool recreation program and focusing on that as one of the big components [so as] to try and provide the kids some place where they would be supervised that's not conducive to substance abuse.

The D.A.R.E. program was selected to address the risk factor of favorable attitudes toward problem behaviors. By incorporating D.A.R.E into the 8th and 10th grade curriculum, the coalition anticipated that youth would increase their social skills and increase awareness in the community regarding the identified risk factors. Although previous evaluations of D.A.R.E.'s effectiveness had been mixed, evaluation results at that time pointed to expanding the curriculum from a single year of implementation to a multiyear strategy of teaching drug prevention strategies to youth.

The afterschool recreation program was selected to address the risk factors of availability of drugs and friends who engage in the problem behavior. By creating a safe, supportive environment accessible to all Novi students in fifth to eighth grades, the afterschool recreation program encouraged the development of a positive peer group and social skills. The program also included recreation with structured support services such as tutoring, mentoring, counseling referrals, and peer mediation. This program was the only prevention strategy to be funded by the Novi Title V initiative; the other two strategies were operated with in-kind funds from the Novi Police Department. The afterschool recreation program was not research-based. Nevertheless, it did include several commonly used youth development strategies, including supervised recreational activities, tutoring, and mentoring.

The substance availability control program was designed to address the risk factor of favorable attitudes toward the problem behavior. To ensure compliance with liquor laws, the program used underage decoys who tried to buy alcohol. The substance availability control program was not a research-based program.

Factors That Influenced Initial Assessment and Planning

According to key stakeholders, the assessment and planning process contributed to the ultimate success of the Title V initiative in Novi. Two factors especially influenced that success:

- ❖ **The state planning grant.** The funding from the state allowed the community to implement the Communities That Care youth survey, which reinforced the findings of the local data collection efforts.
- ❖ **Leadership of key stakeholders.** The community benefited from the leadership of key leaders (e.g., the local police chief and the school superintendent) in engaging other leaders. It also benefited from having a volunteer coordinator to lead the assessment and planning process.

Implementation of Prevention Strategies

The implementation of prevention strategies for the Title V initiative includes the following two tasks: initiating prevention services and activities and identifying and leveraging other resources for prevention. Novi implemented its Title V prevention strategies from 1998 to 2002.

The implementation stage in Novi had the following key components:

- ❖ Novi received Title V funds from July 1998 through June 2001 and Title II funds for an additional 12 months (for a total of 48 months of funding).
- ❖ Novi received approximately \$500,000 in total funding, including a 50-percent match in local in-kind and monetary contributions by community organizations represented on the coalition, including the Novi Police Department and the Novi public schools.
- ❖ The city of Novi served as the unit of local government, and Novi Parks and Recreation served as the fiscal agent.

The Title V funds were used primarily to fund the afterschool recreation program provided by the Novi Parks and Recreation Department. The other prevention strategies included in the Title V initiative, D.A.R.E. and substance availability control, were provided in kind by the Novi Police Department. Each program operated during all 4 years of the Title V initiative, from 1998 through 2002.

Once the coalition received notice to proceed with the Title V initiative, the lead agency on the administration of the afterschool recreation program was transferred from the Novi Police Department, as planned in the Title V grant application, to the Novi Parks and Recreation Department. This transfer of responsibility was based on the concern that some members of the Novi city council had that an afterschool recreation program would work better under the supervision of the Novi Parks and Recreation Department.

Afterschool Recreation Program

Year 1 Implementation

The afterschool recreation program offered free, structured and unstructured, recreational activities at three different sites in the community: the Soccer Zone, the Novi Township Hall, and the Novi Ice Arena. The program also offered professional tutoring services and social skills training to Novi youth between the ages of 10 and 14 years. It included a Teen Mentoring Volunteer Program for 14- and 15-year-old students. This represented an effort to involve some older teens in the program, giving them hands-on work experience and providing earning incentives (e.g., refreshments, gift certificates to restaurants and stores). The program's open enrollment structure allowed students to choose the days when they participated and the activities that interested them. The program was offered each day from 2:30 p.m. to 6:00 p.m. on regular school days, and from 12 noon to 6 p.m. on half-days of school. The Novi afterschool recreation program began on October 26, 1998, and continued through the end of the school year on June 10, 1999. During its first year, 478 students registered, far exceeding the original goal of 100 students.

According to key stakeholders, the main obstacle during the first year of implementation of the afterschool program was the lengthy process of hiring a program director. As noted above, the entire project was transferred from the Novi Police Department to the Novi Parks and Recreation Department, which delayed the hiring process. Once the program director was hired, it took 2 more months to hire additional staff, purchase equipment, solidify sites, and publicize the program.

Year 2 Implementation

In year 2, the afterschool recreation program operated for the entire school year. It operated the same program components as in year 1, with the exception that the formal implementation of a social skills curriculum was not completed because of an emergency leave of absence on the part of the program director. The tutoring program was extremely successful, however. Along with the tutor, several high school students tutored middle school students throughout the entire year. A total of 926 participants registered, and there were 12,385 duplicated units of service, or almost twice the number of units as provided during year 1. According to key stakeholders, the main obstacle was the inability to locate an alternative afterschool program site at the new Novi Middle School. Because of construction delays at

the school and the program director's leave of absence, the move to the new site was postponed until year 3.

Year 3 Implementation

In year 3, the afterschool recreation program operated for the entire year. It operated the same as in the first 2 years, with three significant program changes. First, the initial program director resigned and was replaced by another member of the afterschool program staff. Second, the program had to close one location (the old township hall) because of safety concerns, but was able to open an additional site in the cafeteria and the gymnasium at the new Novi Middle School. Third, because of the reduction of the Title V grant in year 3, instead of a professional adult tutor, high school volunteers and afterschool program staff conducted the homework assistance activities. By the end of the year, 1,128 participants were registered, and there were 11,375 duplicated units of service, slightly lower than in year 2.

Year 4 Implementation

In year 4, to provide the same afterschool recreation program activities at the same sites with reduced Title V funding, the program implemented a fee of \$140 per youth for the entire school year. Financial assistance was available to youth through donations from community organizations such as the Novi Youth Assistance. Stakeholders felt that the institution of this fee contributed to reducing the number of youth registered in the program from 1,128 to 158. As a result, the afterschool recreation program closed three sites; only one site, the Novi Ice Arena, remained open. The program activities remained similar to those offered in years 1 through 3, with an emphasis on recreation and homework assistance. The largest obstacles to program implementation were related to the reduced funding and to the fact that it was unknown whether funding would be available to continue the program in future years.

D.A.R.E.

The Title V initiative supported the Novi Police Department in expanding its D.A.R.E. program to serve not only sixth graders, but also eighth and ninth graders. In the fall of 1998, the D.A.R.E. program was taught for the first time at Novi High School and Novi Middle School. The target population comprised approximately 1,000 students ages 13 through 16 years living in the Novi Community School District. At the high school, D.A.R.E. was taught to ninth graders for 7 weeks as part of the health curriculum; D.A.R.E. homework and test scores were included as part of the students' grade. In the middle school, because of schedule limitations, D.A.R.E. was an elective course for eighth graders.

During the first year, 453 ninth graders completed the D.A.R.E. curriculum, and 193 eighth graders (approximately 50 percent of eighth graders) received D.A.R.E. training. In year 2 (1999–2000), 389 ninth graders and 243 eighth graders completed D.A.R.E. In year 3 (2000–2001), 425 ninth graders and 164 eighth graders completed D.A.R.E. In year 4, implementation of D.A.R.E. continued as it had in previous years. At the conclusion of the Title V initiative, the Novi Police Department decided to continue the program at the middle and high schools.

Substance Availability Control

The Title V initiative supported the Novi Police Department's institution of a program to ensure compliance with liquor laws by using underage decoys. Decoy operations involved having underage persons, under the surveillance of Novi police officers, try to buy alcohol. Enforcement action was taken against persons selling alcohol to the decoys and against the license holder as well. Every liquor control commission license holder in Novi was targeted. According to one key stakeholder:

We have not received the criticism that some other communities have received for the sting program . . . been very successful in that regard. Last time we did it, absolutely nobody sold to our youth, which is quite exceptional, probably won't hold true every time but that was quite exceptional.

Stings were performed one to two times per year during the 4 years of the Title V initiative. A summary of the associated activities is presented below:

- ❖ In March 1998, 57 vendors in the city of Novi were checked to see if they would sell alcohol to minors. Nine were cited for selling to a minor; 12 establishments were not checked because they were closed for the season or for remodeling. The Novi Police Department sent letters to the vendors who passed the sting operation, commending them for complying with the law.
- ❖ In February 1999, 62 vendors in the city of Novi were included in a sting. All of the vendors refused to sell to a minor who tried to buy alcohol.
- ❖ In November 1999, 65 vendors in the city of Novi were included in a sting. Only one vendor was cited for selling to a minor. The Novi Police Department sent letters to those who passed the sting operation, commending them for complying with the law.
- ❖ In June 2000, 66 vendors in the city of Novi were included in a sting. One vendor was not in compliance when a minor tried to buy alcohol.

In the spring of 2000, a Vendor Appreciation Luncheon was held for all vendors who passed the sting operations. More than 120 Novi residents, including local judges, the police chief, the mayor, the liquor control commissioner, council members, and many others attended to congratulate those who were present to receive their awards. This event was supported by the coalition member agencies, including Providence Hospital, Novi Police Department, and Novi Youth Assistance.

In the final years of the Title V initiative, stings continued, with only a small number of vendors not in compliance. Novi also took steps to conduct a tobacco sting at least once a year.

Identifying and Leveraging Other Resources for Prevention

Once funds to implement the Title V initiative were secured, the Novi Communities That Care Coalition began to focus on identifying other resources for prevention and to support the continuation of the Title V program activities. The coalition became a 501(c)(3) organization to facilitate the solicitation and receipt of funds to support its prevention activities. Over the 4 years of the Title V initiative, the

coalition applied for small grants and conducted local fundraisers to support substance abuse prevention education and activities. The funding it received included:

- ❖ Annual funding of approximately \$13,000 from the Oakland County Substance Abuse Office to support the executive director in overseeing the Title V grant process and maintaining the coalition.
- ❖ \$5,000 from the Bauervic-Paisley Foundation to help offset the reduction in Title V grant funding.

In addition, the coalition benefited from local fundraisers such as a golf outing and a charity hockey event.

Factors That Influenced the Implementation of Prevention Strategies

According to one stakeholder, the prevention strategies and activities were supported by leadership in key organizations in Novi:

The [Novi] police provided the officers necessary to expand the D.A.R.E. program into the middle and high school. There was leadership from the schools to provide transportation to the afterschool programs. The schools really came to bat in Novi.

Two factors especially contributed to the community's success in implementing its prevention strategies:

- ❖ **Organizational support.** City agencies such as the Novi Parks and Recreation Department, the Novi Police Department, and the Novi public schools supported the implementation of prevention strategies that fit with their other organizational activities.
- ❖ **Flexibility in implementation.** Particularly with the afterschool recreation program, program staff were able to adjust the program design in response to changes in staff, funding, and participation levels to continue operation.

Monitoring and Evaluation

The Title V monitoring and evaluation process includes reassessing community indicators, and conducting an evaluation of both the strategies and the whole initiative. This section describes the process of monitoring and evaluating the Title V initiative in Novi from 1998 to 2002. It also discusses factors that influenced Novi's monitoring and evaluation efforts.

Monitoring and Evaluating Program Activities

After attempting to evaluate specific components of the afterschool program in year 1 (e.g., tutoring and social skills development), the coalition found that the process was time consuming for staff and required intensive data collection from students in order to demonstrate statistically significant results. The coalition had also implemented the pre- and posttest components of D.A.R.E., but had difficulty interpreting the results to demonstrate an increase in student knowledge. As a result, the coalition decided to look at findings from the Western Michigan Drug Survey and implement the Communities

That Care youth survey every other year to assess the initiative's impact on risk factors related to youth substance use and delinquency.

Ongoing Assessment

The coalition relies on the results of the Western Michigan Drug Survey and the Communities That Care youth survey to demonstrate the impact of efforts to change community social norms concerning the use of drugs and alcohol by Novi youth. Since 1997, these surveys have documented improvements in youth attitudes and behaviors about the use of drugs and alcohol, but how these results are linked to the activities of the Novi Community That Care Coalition is not clear, since the surveys do not include questions about specific prevention programs and projects.

Factors That Influenced Monitoring and Evaluation

The coalition was not able to implement its program evaluation as planned because of the resignation of the initial afterschool program director, who had strong program evaluation skills. However, the coalition uses findings from the Western Michigan Drug Survey, which is implemented every other year, and from the Communities That Care youth survey to assess the overall impact of its initiative on risk factors related to youth substance use and delinquency.

Institutionalization

The process of institutionalizing Title V includes sustaining the key components of the initiative, meeting goals and objectives, and obtaining continuation funding for successful programs and strategies. Novi's efforts to institutionalize its community mobilization and collaboration efforts, its prevention strategies, and its monitoring and evaluation work and the factors that influenced its institutionalization efforts are described below.

At the conclusion of Title V, the Novi Communities That Care Coalition, which was formed to apply for the Title V funding, continued as a small group of dedicated citizens and organizations interested in raising awareness and supporting community education and activities to promote substance abuse prevention.

The prevention strategies initiated through the Title V initiative have continued since the end of the Title V funding. When the Novi Parks and Recreation Department decided not to provide continuation funding for the afterschool program, the Novi Community Education Department took over implementation of the program. Although the program had a slightly different structure once it was institutionalized by the Novi Community Education Department (e.g., new staff and a new curriculum), it still provided recreational and academic afterschool activities to middle school youth. The Novi Police Department offered the middle and high school D.A.R.E. programs and the substance availability control during the Title V initiative without any financial support. Both were institutionalized within the Novi Police Department following the conclusion of the grant.

Community assessments are continuing under the leadership of the coalition. Members led the effort to implement the Communities That Care youth survey in the local high school twice over a 4-year period.

The coalition also took the lead in publicizing and educating key stakeholders in the community about the results of the Communities That Care and Western Michigan Drug surveys to raise awareness.

In Novi, the coalition, prevention strategies, and the strategy of monitoring youth attitudes and behaviors on substance use were all institutionalized at the conclusion of the Title V initiative. The coalition had struggled to maintain an active membership during the Title V initiative. In years 3 and 4, however, the coalition spent more time identifying and supporting new and existing prevention strategies, often targeted to parents and businesses, and this approach helped it attract new community support. The afterschool recreation program, although smaller than it had been in previous years, was recognized as a key prevention strategy by the local school system that chose to institutionalize it. The coalition's ability to publicize to key leaders in the community the results of annual surveys of youth attitudes and behaviors related to substance use helped institutionalize the monitoring process.

Interpretation

The Novi Title V initiative is an excellent example of the successful implementation of the Title V model. The benefits that implementing the Title V initiative offered the community included the formation of the Novi Communities That Care Coalition, which was instrumental in supporting prevention education and activities; implementing new youth programs, including an afterschool recreation program that served a significant number of middle school students by providing recreational, educational, and social skills development activities; and carrying out a strategy for ongoing monitoring of youth attitudes and behaviors on substance use. The coalition and its executive director are good examples of how strong leadership, vision, and advocacy are key elements of a successful Title V initiative.

The Title V training was recognized as an important step in informing and mobilizing key leaders and community members to try a community-based prevention strategy to address concerns about youth substance use. The initiative benefited from state and local support and resources, and from the leadership of community leaders. However, due to a misunderstanding of the application process, the relationship between the coalition and the city council was somewhat strained. The coalition leaders who prepared the grant application had not understood that it had to be submitted by the unit of local government—the City Council. The coalition tried to educate the city council about the Title V initiative, but the council's support remained limited to its fiduciary responsibilities.

In conducting the needs assessment, reviewing the data collected by coalition members and the Communities That Care youth survey helped verify the need to implement new school- and community-based prevention strategies and to educate community leaders about the issues. Once the priority risk factors were identified, the community selected prevention strategies that targeted the middle school population, while also trying to influence community norms about substance use. The prevention strategies were implemented by professional staff members at the Novi Parks and Recreation Department and the Novi Police Department. These individuals were able to implement the planned programs while remaining flexible and modifying the programs as necessary because of changes in funding, staffing, and participation. The administrative capacities of these organizations were very beneficial in program implementation.

Although the Novi Title V initiative was not able to implement the evaluation strategies proposed in the initial Title V grant application, it was able to institute a strategy for communitywide monitoring of youth attitudes and behaviors on substance use. A strong program evaluation would have facilitated documentation of the outcomes of the specific Title V prevention strategies, but no evaluation expertise existed in the program staff or the coalition. Anecdotally, it was reported that the Title V prevention strategies probably had a significant impact on the lives of individual youth who used the services (e.g., homework assistance or drug education), but individual youth followup data were not collected.

Summary

Key stakeholders feel this has been a learning experience in collaborative community planning and implementation. They found that monitoring the Title V initiative may not be a large enough incentive to sustain a community board long term. Despite Novi's initial difficulties, however, this community was ultimately successful with its Title V initiative. As a result of the initiative, the community has a coalition and new strategies for monitoring substance abuse issues among community youth. It also has new, ongoing prevention programs to benefit the youth of the community.

Title V in Michigan: Concluding Remarks

In Michigan, the Family Independence Agency and its SAG dedicated significant resources to support the Title V communities in addressing delinquency prevention. This support (e.g., planning grants, technical assistance, and high funding levels) was a significant factor in the successful implementation of the Title V initiatives in both Holland/West Ottawa and Novi.

One key aspect of Michigan's Title V implementation was its ability to engage influential stakeholders in local communities to participate and lead the delinquency prevention activities. Although some of these leaders (e.g., police chiefs and juvenile services staff) had previously been engaged in implementing juvenile justice grants, many of the key stakeholders who participated in both the Holland/West Ottawa and Novi Title V initiatives (e.g., religious leaders, local hospitals, and the public schools) had less experience with these types of initiatives before their involvement with Title V. These new stakeholders in delinquency prevention planning, implementation, and sustainability were instrumental in leveraging additional resources and supporting the success of the Title V prevention efforts.

Michigan demonstrates that long-term support and commitment to prevention efforts at the state and local levels, strong community collaboration, and fidelity to the Title V model can be key factors in the ultimate success of community prevention programs.